

Patent
Attorney's Docket No. 024444-551

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

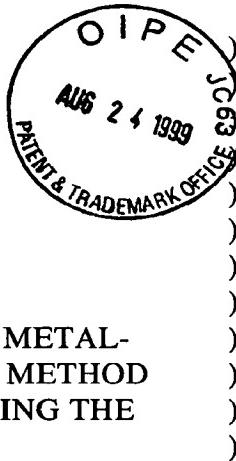
In re Patent Application of

Mattias BERGLUND et al

Application No.: 09/159,584

Filed: September 24, 1998

For: TWO-PIECE ROTARY METAL-
CUTTING TOOL AND METHOD
FOR INTERCONNECTING THE
PIECES



Box Issue Fee

Batch No. T91

**PAYMENT OF ISSUE FEE AND AUTHORIZATION
TO CHARGE DEPOSIT ACCOUNT FOR ANY DEFICIENCY**

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

A check for the required Issue Fee in the above-identified application is enclosed. If the check has become separated from this paper, or if the amount of the check is incorrect, the Commissioner is hereby authorized to charge any fees under 37 C.F.R. §§ 1.18, 1.19, and 1.21 that may be required by the attached Issue Fee Transmittal Form, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in triplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

By: Ronald L. Grudziecki
Ronald L. Grudziecki
Registration No. 24,970

P.O. Box 1404
Alexandria, Virginia 22313-1404
(703) 836-6620

Date: August 24, 1999

(10/97)

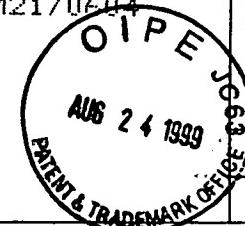
PART B—ISSUE FEE TRANSMITTAL

Complete and mail this form, together with application fees, to: Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

RONALD L GRUDZIECKI
BURNS DOANE SWECKER & MATHIS
P O BOX 1404
ALEXANDRIA VA 22314-1404



Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

(Depositor's name)

(Signature)

(Date)

| APPLICATION NO. | FILING DATE | TOTAL CLAIMS | EXAMINER AND GROUP ART UNIT | DATE MAILED |
|---------------------------------|-------------|-------------------------|-----------------------------|---------------|
| 09/159,584 | 09/24/98 | 015 | HOWELL, D | 3722 06/04/99 |
| First Named Applicant BERGLUND, | | 35 USC 154(b) term ext. | = | 0 Days. |

TITLE OF INVENTION TWO-PIECE ROTARY METAL-CUTTING TOOL AND METHOD FOR INTERCONNECTING THE PIECES

| ATTY'S DOCKET NO. | CLASS-SUBCLASS | BATCH NO. | APPLN. TYPE | SMALL ENTITY | FEES DUE | DATE DUE |
|-------------------|----------------|-----------|-------------|--------------|-----------|----------|
| 3 024444-551 | 408-001.00R | T91 | UTILITY | NO | \$1210.00 | 09/07/99 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" Indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Burns, Doane, Swecker & Mathis, L.L.P.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE Seco Tools AB

(B) RESIDENCE: (CITY & STATE OR COUNTRY) Fagersta, Sweden

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual corporation or other private group entity government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

Issue Fee

Advance Order - # of Copies 10

4b. The following fees or deficiency in these fees should be charged to:

DEPOSIT ACCOUNT NUMBER 02-4800
(ENCLOSE AN EXTRA COPY OF THIS FORM)

Issue Fee

Advance Order - # of Copies 10

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

Ronald L. Grudziecki #24,970

(Date)

8/24/99

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

00

PART B—ISSUE FEE TRANSMITTAL

Complete and mail this form, together with applicable fees, to: Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

QM21/0604

RONALD L GRUDZIECKI
BURNS DOANE SWECKER & MATHIS
P O BOX 1404
ALEXANDRIA VA 22314-1404

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.



(Depositor's name)

(Signature)

(Date)

| APPLICATION NO. | FILING DATE | TOTAL CLAIMS | EXAMINER AND GROUP ART UNIT | DATE MAILED |
|-----------------------|-------------|---------------------------|-----------------------------|---------------|
| 09/159,584 | 09/24/98 | 015 | HOWELL, D | 3722 06/04/99 |
| First Named Applicant | BERGLUND, | 35 USC 154(b) term ext. = | | 0 Days. |

TITLE OF TWO-PIECE ROTARY METAL-CUTTING TOOL AND METHOD FOR INTERCONNECTING INVENTION THE PIECES

| ATTY'S DOCKET NO. | CLASS-SUBCLASS | BATCH NO. | APPLN. TYPE | SMALL ENTITY | FEES DUE | DATE DUE |
|-------------------|----------------|-----------|-------------|--------------|-----------|----------|
| 3 024444-551 | 408-001.00R | T91 | UTILITY | NO | \$1210.00 | 09/07/99 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Burns, Doane, Swecker & Mathis, L.L.P.

2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

(A) NAME OF ASSIGNEE Seco Tools AB

Issue Fee
 Advance Order - # of Copies 10

(B) RESIDENCE: (CITY & STATE OR COUNTRY) Fagersta, Sweden

4b. The following fees or deficiency in these fees should be charged to:

Please check the appropriate assignee category indicated below (will not be printed on the patent)
 individual corporation or other private group entity government

DEPOSIT ACCOUNT NUMBER 02-4800
(ENCLOSE AN EXTRA COPY OF THIS FORM)

Issue Fee
 Advance Order - # of Copies 10

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

Ronald L. Grudziecki #24,970

8/24/99

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE

Copied from 09878240 on 05/16/2006